ISSUE SLIP STAPLE AREA (for additional cross references) INITIALS POSITION ID NO. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** BEST AVAILABLE COPY RESPONSE FORMALITY REVIEW **INDEX OF CLAIMS** Rejected Interference Appea¹ (Through numeral)... Canceled Restricted Objected Date Claim Date Claim Claim Original Final Final

If more than 150 claims or 10 actions staple additional sheet here

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